Submit your request to the Unit Supervisor, Security Lieutenant, or CC/CM. Your Unit Supervisor, Security Lieutenant, or CC/CM will help you resolve the problem or it will be forwarded to the appropriate person. Unit Supervisors, Security Lieutenants, or CC/CM will forward the request, NOT the inmate. Request slips not reviewed by the Unit Supervisor, Security Lieutenant, or CC/CM will be returned to you.

TO: Unit Supervisor, Security L	lieutenant, or CC/CM		DATE: 10 · 3 - 2607
FROM: MA WOLFF	(HAALT)	o ************************************	ID #: 2 Y322
Last Name	First Name	Middle Initial	•
SOUTH DIVISION	/A-10B	46%	PALE 16F1
Housing Unit	Pod/Tier/Div. Cell	Work/Shift	_
INMATE REQUEST: 60001	MONNING-	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
I AM REQUESTIA		WOULD PUT	MYJELF ON (FU
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			Innate Signature
TO: MN. LUCIE BI	LODEAU AT U	HIT harabsh	DATE:
	مور	a de la companya de	
FROM: Unit Supervisor, Securit	y Lieutenant. or CC/CI	M	
REMARKS:			
	<u> </u>		
·			Staff Signature
TO: Walff C	narles		DATE: 10-5-07
Inmate	Housing Unit	Cell#	DATE:
	loderes	•	
FROM: (15)	- OUPCLER		
REMARKS: have	put you	on the ce	Il feed list
**	<u> </u>		· .
	**************************************	- UN	1 Bilale
I THAN	4H YOU		Staff Signature
_ , , , e,,		don't have been a second	KIN LILA
	F	Received By	Wy VIII
		- ·	mmato Signaturo

Yellow - Inmate

DEPARTMENT OF CORRECTIONS

STATE OF NEW HAMPSHIRE P.O. Box 14 CONCORD 03301

RECEIVED

SEP 0 7 2007

GRIEVANCE FORM

(See Reverse for Instructions)

NHSP/M WARDENS DIFFICIEN WATHA

	1. Date: <u>9-5-2007</u>
2. GRIEVANT: CHANLES DAY	WOCFF - 1A-10B 3. Number: 24322
4. Address: NHSP CONC	OND, NH 03301 MS
	HIS HONOR MAGISTRATE JAMBI R. MUINHEAD
	ONO ERES FOR ME WHICH MA NICK STACY
	CELVED HAND BOILED ELL ON 9-3-2007 BAEN
	ON 9-4-2007 BREAKPAUTIONLY & I SPOKE TO
INMATE DAME! KEAL	H THU DAY 9-4-201 HE TOLD METYOU
CAT WHAT I GIVE V	ON ON YOU DORT EAT MANCK STACY IS
IN CONTEMPT OF CO	UAT. ON THE ABOVE DATE MA NICH STACY
	TO JEAUE MYJELP BARAKPAIT A VIOLATION
OF N.H. ADMINAUCES, COM	1301.03 NEITECTRUCY JUMITTED
SHISHONON ALLO TOLD IFACY JAM EMPLESTOTOLD IFACY JAM EMPLESTOTOLD INCOMPLETED I	MARIEN Signature: Church of WM
A A ACE You will be penalized	if statements are untrue. Use Attachments it necessary.
Received 9-27-2	SOT AT TOUTHN JUN MANNE
TO: DIRECTOR (Warden) AICHAI	
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	newall foreigns. Duly A COUNT
	in contempt of court por you. on
	disperses to leave the driving hall due to
YOUR DEMONSOR AND	Not when a cell their too brightont-
L'ALOF LENT WAN	Authentication: The My Ferry
TO: COMMISSIONER	Date of Commissioner's Action:
Commissioner's Action:	
	
	Authortication

Submit your request to the Unit Supervisor, Security Lieutenant, or CC/CM. Your Unit Supervisor, Security Lieutenant, or CC/CM will help you resolve the problem or it will be forwarded to the appropriate person. Unit Supervisors, Security Lieutenants, or CC/CM will forward the request, NOT the inmate. Request slips not reviewed by the Unit Supervisor, Security Lieutenant, or CC/CM will be returned to you.

TO: Unit Supervisor, Security Lieutenant, or CC/CM

	· · · · · · · · · · · · · · · · · · ·		
FROM: MR. WOLFF	CHANLES		ID #: 24322
Last Name	First Name	Middle Initial	PAGE 10F1
SOUTH DIVIJION	1A-10B	ACN_	_
Housing Unit	Pod/Tier/Div. Cell	Work/Shift	
inmate request: <i>Gooda</i>	MONNING-		
1.Q HAVE I EVER	BEEN TEITED	FON HELL	CBACTEN PYCONI?
A.I THANK YOUF	ON THE CM	NI A AITA	
3. Q. THE INSTAUC		YLANTA E BOTTLE O	P MYLANTA TELU
MUJELY TO T	AKE YOZ PEN		SHOUL) I TAKE
THE 12 02 BOT	tre enery t	HRODAYI-I	MANK YOU.
A.		<u> </u>	PECTRULLY
		ch	ent Wall
(If you need more space, use plain pape	er.)	7	Inmate Signature
TO: DRCT (10 CAGLA)	2051 MA C/. L	V(,	DATE:
FROM: Unit Supervisor, Securit	y Lieutenant. or CC/CN		1 (44)
REMARKS:		OCT	· · · · · · · · · · · · · · · · · · ·
_ _		<u> </u>	<i>Pa</i>
		•	<u>q</u>
			04 W 01
To Charles W	of H	,	Staff Signature
10:			DATE
Inmate	Housing Unit	Cell #	
FROM:			
REMARKS: +	los homo	67.0	
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4 m	one of		Staff Signature
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7	J R	received by	Inmale Signature

DATE: DCT- /J1-8067

Submit your request to the Unit Supervisor, Security Lieutenant, or CC/CM. Your Unit Supervisor, Security Lieutenant, or CC/CM will help you resolve the problem or it will be forwarded to the appropriate person. Unit Supervisors, Security Lieutenants, or CC/CM will forward the request, NOT the inmate. Request slips not reviewed by the Unit Supervisor, Security Lieutenant, or CC/CM will be returned to you.

TO: Unit Supervisor, Security Lieutenant, or CC/CM				DATE: 10-9-2007
FROM:	MR. WOLFF	CHONG!		ID #: 24322
	Last Name	First Name	Middle Initial	
.=	SOUTH DIVISION-16	10B	26%	PACETORI
	Housing Unit	Pod/Tier/Div. Cell	Work/Shift	
	REQUEST: 600 DA			h An-
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(If you need	d more space, use plain paper.)		My WH
•		•		Mate Signature
TO: M 1	F VICHAUD LIV	17- KIT CHE	in supery	140ATE: 10-10-07
FROM: U	Jnit Supervisor, Security	Lieutenant. or CC/Cl	М	
REMARI	•	forward		
KEWIAKI	72:	0		
			- u	n Beloden
				Staff Signature
то: <u></u>	OLFF Charles	MCS	1A :	DATE: 16/16/07
	Inmate	Housing Unit	Cell #	
FROM:_	Sep. Gracy			
REMARI	KS: Voon Hoxen	week will	he brace	12 to VOO.
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to	Medical Dept. 17	Fyou have	AN esting	disorden.
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· hu	Con has EN	AT D. I	Received By	Inmate Signature
	UTO FAT EAG	· War M	3 mg	My we pos
White	- Offender Records	Yellow - Inmate	Pink - Stan	SP-014 (A) REV. 3/98

Submit this request to the Unit S Lieutenant, or CC/CM will help Unit Supervisor, Security Lieute	you resolve the issue	or it will be forwar	Your Unit Supervisor, Security ded to the appropriate person. THUNSDAY
TO: Unit Supervisor, Security	DATE: 9-20-2001		
FROM: MR, WOLFF Last Name	CHANURI First Name	J Middle Initial	ID # <u>: 24322</u>
CONCORD, NH S		1A - 10B	3
Facility	Housing Unit	POD Cell	Work/Shift
INMATE REQUEST: GOOD. AFTEN NEADINE Y FOLLOWING, WHEN	I WAL AUD I	NAFFUANDS TO	
TO HELP AFLIEVE A	EN DAY EON MY DAILY ON OTNIN PENNINH	GOING EXCAUS	INDUNIES TO MYBODY INTING PAINO I AM NOW PAGOTO MEAST NOTE
THE VA TXAL PAOU) ALL BY MY PAIVAT	DING ME'NI E MD T3 JANI	THE THE A	ED OF ACETAMNOTHER
TO TAKE THE 2400	ME PEN DAY FO	A MY PAIN N	ESPECTEULLY,
(If you need more space, use plain fa		400 	Inmate Signature
TO: DA JOHN EPPOL	TO MD	J. Everywell	PATE:
FROM: Unit Supervisor, Secu	rity Lieutenant or Co	C/CM U	
REMARKS:			2 4 2007
			X.
· ***********	*****	****************	Staff Signature
0.5	Let !	h Ellou	DATE: (6-3-)
FROM: Staff Member Name/(Office		DATE: (() ZJZJ
REMARKS:	0		
ADEN	and my	our 6 1	Minus
	ne asmau		
		t	Staff Signature
		Received By	Anmate Signature

Submit this request to the Unit Supervisor, Security Lieutenant, or CC/CM Lieutenant, or CC/CM will help you resolve the issue or it will be forw Unit Supervisor, Security Lieutenant, or CC/CM will be forwarded to you	arded to the appropriate person.
TO: Unit Supervisor, Security Lieutenant, CC/CM	DATE: 9-17-2001
FROM: MR. WOLFF CHARLES J Last Name First Name Middle Init	ID #: 24322
CONCORD, NH SOUTH DIVISION JA-108	B PACELOZ
Facility Housing Unit POD Cell INMATE REQUEST: GOOD MOINING = 1.900 JOU FEEL IT IT & GOOD IDEA TO	Work/Shift TAKE MEDICATIONS
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DAILY PATH - I DO NOT.	TO HAUF AGONIZING
JAN NICH ITALY IN A WRITTEN STATEMENT THE WILL WITH THAT HE WILL WITH THAT HE WILL WITH THAT HE WILL	NOT PLOUDE MY SELF.
(If you need more space, use plain paper.)	Inmate Signature
TO: DA CECIA ENGLANDER MD CO AJC	DATE:
FROM: Unit Supervisor, Security Lieutenant or CC/CM	; ;
REMARKS:	SEP 1 8 2007
——————————————————————————————————————	
- ************************************	Staff Signature
FROM: Staff Member Name/Office	Staff Signature
	Staff Signature
Staff Member Name/Office	Staff Signature
Staff Member Name/Office REMARKS:	Staff Signature ***********************************
Staff Member Name/Office REMARKS: Common of the property o	egitaia,
Staff Member Name/Office REMARKS:	egitaia,

Lieutenant,	or CC/CM will help		it will be forwarded	our Unit Supervisor, Security If to the appropriate person. MONDAY
•	•	y Lieutenant, CC/CM		DATE: 9 17-2001
	R. WOLFF	CHANCEL	>	ID #: 24322
1 KO	Last Name	First Name	Middle Initial	PALT 2072
(0)	NCOND, NH SOU	I - AI-MOIZIUIG HT	OB	B
	Facility	Housing Unit PO)	Cell	Work/Shift
(If you need m	The physical parts of the physical phys	Per.)	THUS THE SE	Inmate Signature
то: <u>р</u> ((env phera	NDEV WD CLOFF		DATE:
FROM: Uni	•	rity Lieutenant or CC/C	M	SEP 1 8 2007
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*****	*******	********	*******	Staff Signature ***********
FROM:Sta	ff Member Name/C	Office		DATE:
REMARKS	·			
	All	~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~		
				Staff Signature
		Re	eceived By	Inmate Signature